Date: January 13, 1993

MANUAL Program Policies and Procedures manual, Volume III

CHANGE NO. 92-4CM

TO: <u>Area Agency on Aging Administrators</u>

EFFECTIVE: Immediately make the following changes to Program and Policies Procedures
Manual, Volume III, Section 5

Pages 1, 2, 12, 13, 16, 17, 19, 20 & Appendix A – Page 4.

Subject: Revisions to the In-Home Aide Services Standard

The following revisions to the In-Home Aide Services Standards are being made to: 1. clarify the content of existing service standards to ensure, to the extent possible, that clients receive the appropriate level of In-Home Aide Services; and 2. comply with service delivery requirements stipulated in Administrative Procedures Act Rules for Home Care Agencies providing In-Home Aide Services subject to Home Care Agency Licensure (10 NCAC 3L).

Revisions made for the purpose of clarification are the result of recommendations endorsed by the In-Home Aide Services Task Force. This broad based task force was responsible for the initial development of the standards and was reconvened in November, 1992 to address concerns raised by various In-Home Aide constituent groups regarding personal care tasks provided at level II. Revisions and additions made for clarification purposes are effective July 1, 1993 and so noted. Those items that are included in the revised standards which are the result of Home Care Agency Licensure Requirements are so noted and effective immediately unless otherwise indicated {i.e. frequency of aide supervision – DoA Service Standards Manual, Vol. III, Sec. 5 (V) (C) (2)}.

The following is a summary of the service standard content which has been revised. For your convenience, new content is underlined. Also attached are the revised pages (1, 2, 11 0 23 and Appendix A – page 4) of the In-home Aide Service Standard. Please incorporate these pages into Volume III, Section 5 of the Division of Aging Service Standards Manual. For ease in finding the revisions in the In-Home Aide Services Standard, a vertical line has been drawn in the left hand margin to reflect the new content.

(V) (A) Service Delivery

- 3. Assessment/reassessment of Client
 - b. A full reassessment must be completed at least every twelve months or as the client/family situation warrants. Consultation with a RN is required for Level II clients receiving personal care tasks if the client's personal care needs have increased due to changes in a medically related problem to determine the appropriate level of In-Home Aide Services needed. (Effective July 1, 1993)
 - c. A review of the client/family situation must be completed by an appropriate professional at least quarterly. If a reassessment has been conducted <u>in that quarter</u>, it meets the requirements for a quarterly review. <u>The In-Home Aide Service plan should</u> also be reviewed at least quarterly and revised based on the client's needs.

When Level II or III Personal Care is being provided to a client, the appropriate professional shall visit the client in his residence at least quarterly to review the client's general condition, progress and response to services provided. Consultation with a RN is required for Level II clients receiving personal care if the client's personal care needs have increased due to changes in a medically related problem to determine the appropriate level of In-Home Aide Services needed. (Effective July 1, 1993)

If the same professional is assigned responsibility for supervision of the In-Home Aide and the Quarterly Review, these functions may be conducted during the same home visit. (Effective July 1, 1992 – See 10 NCAC 3L.1202, Home Care Agency Licensure.)

4. In-Home Aide Service Plan

In-Home Aide Service Plans must include:

- Measurable outcome goal(s): a.
- In-Home Aide Service level(s) to be provided; b.
- Specific tasks to be performed; c.
- Frequency of service provision; d.
- Anticipated duration of the service; conditions for continuing and/or discontinuing e. service;
- <u>f.</u> Safety measures and activity restrictions that are specific to the client (for Level II or Level III – Personal Care only – Effective July 1, 1992 – See 10 NCAL 3L .1202, Home Care Agency Licensure);
- Signature of client/designated person indicating agreement with the service plan; g.
- Signature of agency professional staff developing the service plan. h.
- When clients receiving Level II services request assistance with one or more of the <u>i.</u> following tasks:
 - Applying ace bandaged, TED's, or binders;
 - Applying/removing prosthetic devices; and
 - 1. 2. 3. Assisting client with self-monitoring of temperature, pulse, blood pressure and weight; the In-Home Aide Service Plan must specify that the client has requested such assistance and that the client is responsible for directing these tasks and for making decisions regarding actions to be taken as a result of temperature, pulse, blood pressure, and weight readings. (Effective July 1, 1993).

For all levels, except Levels II and III Personal Care, each client's In-Home Aide Service Plan must be reviewed at least every 12 months or as the client's condition warrants as documented in the reviews or reassessments. For Level II and Level III Personal Care, the Service Plan must be reviewed at least every three months by the appropriate agency professional and revised as needed based on the client's needs. (Effective July 1, 1992 – See 10 NCAL 3L.1202, Home Care Agency Licensure.) All changes in tasks must be documented and dated on the In-Home Aide Service Plan by the responsible professional.

(V) (B) Competency Requirements and Training Recommendations

1. Competency Requirements

Aides who provide In-Home Aide Services must meet the competency requirements for the level of service they are regularly required to perform. (Exception: An aide performing any task in Level III Personal Care must meet the competency requirements for that level and be registered as a Nurse Aide I with the NC Board of Nursing Division of Facility Services). Meeting competency requirements include a correct demonstration of the tasks to an appropriate professional.

(V) (C) Supervision

- 2. Frequency of Required Aide Supervision
 - a. Level I Frequency: A supervisory home visit or telephone call to the aide within the first calendar week of an aide assignment is recommended. A quarterly on-site supervisory visit to the home of at least one client served by each in-home aide is required.
 - b. Level II Frequency: A supervisory home visit or telephone call to the aide within the first calendar week of an aide assignment is recommended. A quarterly on-site supervisory visit to the home of at least one client served by each in-home aide is required.

For aides providing Level II personal cares tasks, a supervisory visit to each client's place of residence at least every three months, with or without the in-home aide's or other allied health personnel's presence and at least annually, while the in-home aide or other allied health personnel is providing care to each client is required. (Effective July 1, 1993).

In each of the two intervening months, the supervisor should have some type of contact (telephone, office conference, or home visit) with the aide <u>and</u> the client/designated person to ensure service provision is running smoothly. These contacts may be initiated by the aide, client or the supervisor.

c. Level III – <u>Home Management Track</u> – Frequency: Supervisory home visit of telephone call to the aide with the first calendar week of an aide assignment is recommended. An on-site <u>supervisory</u> visit to the home of at least one client the aide is <u>serving</u> is required at least every 60 days.

In the intervening month, the supervisor should have some type of contact (telephone, office conference, or home visit) with the aide <u>and</u> the client/designated person to ensure service provision is running smoothly. These contacts may be initiated by the aide, client or the supervisor.

d. Level III – Personal Care Track – Frequency: Supervisory home visit or telephone call to the aide within the first calendar week of an aide assignment is recommended. The appropriate health professional shall make a supervisory visit to each client's place of residence at least every three months, with or without the in-home aide's presence, and at least annually, while the in-home aide is providing care to each client to assess the

care and services being provided. (Effective July 1, 1992 0 See 10 NCAC 3L.1110, Home Care Agency Licensure.

In each of the two intervening months, the supervisor should have some type of contact (telephone, office conference or home visit) with the aide and the client/designated person to ensure service provision is running smoothly. These contacts may be initiated by the aide, client or the supervisor.

e. Level IV – Frequency: A supervisory home visit or telephone call to the aide within the first calendar week of an aide assignment is recommended. Either the social worker or line supervisor will make a home visit at least every 60 days for clients receiving home management In Home Aide Services visit to the home of at least one client the aide is serving at least every 60 days.

(VI) (A) Client Records

Records must be kept for each In-Home Aide Services client and must include:

- 1. Documentation of request/authorization for services (e.g. intake/screening form);
- 2. <u>Source of referral for Level III or Level III Personal Care (Effective July 1, 1992 See 10 NCAC 3L .1402, Home Care Agency Licensure)</u>;
- 3. A copy of the completed initial assessment;
- 4. Copies of all completed reassessments;
- 5. Copies of the initial and any revised In-Home Aide Service Plans;
- 6. Documentation of significant client information (e.g. client appears disorientated, listless, etc.) For Level II or Level III Personal Care, the names of next of kin or legal guardian must be included. (Effective July 1, 1992 See 10 NCNA 3L .1402, Home Care Agency Licensure);
- 7. Documentation of client eligibility;
- 8. Documentation of quarterly reviews;
- 9. Documentation of notifying client of service reduction, denial or termination;
- 10. Documentation showing that, prior to the initiation of services, the home care agency discussed with and provided each client with a copy of his rights and responsibilities (Effective July 1, 1992 See 10 NCAC 3L .1007, Home Care Agency Licensure and accreditation organization standards); and
- 11. Documentation of Client Registration Form (NIS) reassessments.

(VI) (B) In-Home Aide Records

It is expected that a record will be kept by the agency providing the service for each aide providing In-Home Aide Services. At a minimum it should include;

- 1. A record of all competencies completed by the aide and the related level(s) of service the aide is able to perform;
- 2. A copy <u>Verification</u> of the aide's current registration with the North Carolina <u>Board of Nursing Division of Facility Services</u> as a Nurse Aide I, if Level III Personal Care tasks are provided by the aide.

(VII) Quality Assurance Requirements

All agencies providing In-Home Aide Services must be either licensed by the Department of Human Resources as a home care agency or certified or accredited through one of the following accreditation organizations, or other entities recognized by the Department of Human Resources or the North Carolina Medical Care Commission.

One final revision to the Standard will be made July 1, 1993. The task "**Making an Occupied Bed**" will be deleted from the Level II task listing. It will remain listed as a Level III Personal Care task.

Please share this information with appropriate service providers as soon as possible. Although we plan to distribute copies to In-Home Aide Service providers, there will be a delay in their receipt of this information from the Division of Aging due to the time required to print the number of copies needed. If you have any questions, please contact Susan Harmuth or Jane Sullivan at 919-733-3983.

Sincerely,

Bonnie M. Cramer

BMC/SLH/jws

Attachment

Cc: In-Home Aide Service Providers
DSS Adult Programs Representatives
DoA Staff